



**Busing Request for Ineligible Students (2018-2019)**  
**(Must be approved by Director of Transportation)**

NOTE: Due to safety concerns, this form must be submitted and approved by the Department of Transportation, prior to implementation of transporting this student.

The form must have a school administrator's signature and the students District ID # must be filled in. This will help us locate the student record. If the grade is K please put KA or KP If all information is not included, this form will be returned. (Parent or guardian is responsible for student transportation, if outside school boundaries.)

School: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ District ID: \_\_\_\_\_

Home Address: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Is this student attending your school on a Special Permit?      Yes      No

This request is to ride: (Circle)    AM    PM    BOTH    KA FROM SCHOOL    KP TO SCHOOL

**School Administrators Signature:** \_\_\_\_\_

If requesting bus service to a daycare provider, within school boundaries, or other family member please provide information below:

Day Care Providers Name: \_\_\_\_\_

Day Care Address: \_\_\_\_\_

Day Care Phone: \_\_\_\_\_

Day Care Relationship (if any) \_\_\_\_\_

*Below this line is for District Use Only*

Is this student eligible for busing from their home address?      YES      NO

Closest existing and eligible bus stop location:

Bus #: \_\_\_\_\_ Stop: \_\_\_\_\_ Pick Up Time: \_\_\_\_\_ Drop Off Time: \_\_\_\_\_ Friday Time: \_\_\_\_\_

Stop Address: \_\_\_\_\_

How many students are currently assigned to this bus? \_\_\_\_\_

Information verified at Transportation by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Reason \_\_\_\_\_

Transportation Directors Signature: \_\_\_\_\_